		RI DEPARTMENT OF REVENUE 20	07 FOR	M MO-10	40B									
INI MA	DIVIE VRRI	DUAL INCOME TAX RETURN ED FILING COMBINED	VEN	DOR CODE	002									
			SE'S SOCIAL S	SECURITY NUMBE	R									
NA	ME (LA	ST) (FIRST)		M.I. JR,	SR O									
_					BECEASED IN 2007									
SP	OUSE'S	S (LAST) (FIRST)		M.I. JR,										
IN (CARE	OF NAME (ATTORNEY, EXECUTOR, PERSO	NAL REPRES	ENTATIVE, ETC.)										
PR	ESENT	ADDRESS (INCLUDE APARTMENT NO. OF	R RURAL ROU	TE)	COUNTY	F RESIDENCE			SCHOOL [DISTRICT NO.				
017		WAL OR POOT OFFICE	07475	Tap cope	l lau	AGE OUTOK THE			DOVES TO	AT ADDIV TO	(011005			
CII	Y, TOV	VN, OR POST OFFICE	STATE	ZIP CODE	AG	EASE CHECK THE A E 65 OR OLDER YOURSELF	BLII	ND YOURS	<u>10</u>	10 APPLY 10 10 10 10 10 10 10 10 10 10 10 10 10	D NC	N-OBLIGA YOURSELI	TED S	SPOUSE
						SPOUSE		SPOUS		SPOUSE		SPOUSE	_	
	1.								You	rself		Spo	ouse	- :
Ш		(See worksheet on page 8.)									0			00
MO		Any state income tax refund include Subtract Line 2 from Line 1. This								i	0 -			00
INCOME	3. 4.	Total Missouri Adjusted Gross Inc							4		0 =	00		: 00
-	5.											; 00	İ	
		(The total of the two must equal 1							5		%	%		
	6.	Enter the exemption amount of \$4	1,200 on Lir	ne 6					6			00		
	7.	Tax from federal return				er this amount			or					
SN		(Do not enter amount from your Form W-2(s)— NOT federal tax wi	thheld)			,000, whicheve			7	+		00		
잂	8	Missouri standard deduction or ite	,						-					
DEDUCTIONS	0.	If you are age 65 or older, or blind,								+		00		
	9.	Number of dependents you claim					\neg							
ľ		1040A, Line 6c. (Do not include	-		•		_	31,200		+		00		
		Long-term care insurance deduct										00	-	
H	11.	Total Deductions — Add Lines 6 to Missouri Taxable Income — Subtra										00	ł	
S	12.	Wissouti Taxable Income — Subtra					rself		Spot	se				
TAXES	13.	Multiply Line 12 by the percentage	es on Line	5 for you and	your spou	se		13		0	0	•		00
ľ	14.	Use the tax table on back of this form to	figure the tax	on amounts fror	m Line 13 fo	r you and your sp	ouse.	14		0	0			00
		Total Tax — Add your tax and you							15			00	ļ	
	16.	Missouri tax withheld for you and you Form 1099(s). Attach copies of For							16			00		
S	17.	Any Missouri estimated tax paym										00		
먎	18.	Total Payments — Add Lines 16 a	-									00	1	
K.	19.	If Line 18 (Total Payments) is mor	e than Line	e 15 (Total Tax	kes), enter	the difference								
PAYMENTS/REFUND		(amount of overpayment) here.	•									00		
ME	20.	Amount from Line 19 you want ap	oplied to ne Children's	xt year's taxe	Elderly &		Vorkers'		Childhood	Missouri	Gene	eral Addl. Trust	A	ddl. Trust
Α¥	21	Enter the amount of your	Official		Home Delivered	National Workers	Memoria		Lead Testing	Military Family	General Reve Revenue		F	und Code See Instr.)
╚	۷۱.	donation in the trust fund	,	,	Meals	dualu	,		resurig	Relief Fund			_ -	
L	22.	boxes to the right 21 Subtract Lines 20 and 21 from Line	00	00	00	00	00	_	00	00		00	00	: 00
ا	22.	Department of Revenue, P.O. Bo										00		
L 70	23.	If Line 18 is less than Line 15, ent	er the differ	ence here. Yo	u have an	amount due.							1	
MAIL		Sign below and mail to: Departm												
[=	lf vo	Jefferson City, MO 65105-3370. AMOUNT YOU OWE 23 00 you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronical												
\vdash	Under	penalties of perjury, I declare that I have examined	this return, inclu	iding accompanying	schedules and	statements, and to the	best of	my knov	wledge and b	elief it is true, co	rrect, and	complete. De	claration	of prepare
ш	(other	than taxpayer) is based on all information of which hities of perjury that I employ no illegal or unauthorized	e/she has any kno	owledge. As provided	in Chapter 143	, RSMo, a penalty of up	to \$500) shall be	e imposed on	any individual wh	o files a fri	ivolous return.	l also de	eclare unde
JR	I autho	orize the Director of Revenue or delegate to di	scuss my returr	and attachments					1	EPARER'S PHONE				
SIGNATURE	signa	eparer or any member of the preparer's firm. TURE	L YES L	NO DATE		PREPARER'S SIGNA	TURE					FEIN, SSN, O	R PTIN	
Ş	V	1												
الم	SPOUS	SE'S SIGNATURE		DAYTIME TELEPHO	ONE	PREPARER'S ADDR	ESS AND	ZIP CC	DDE				DATE	

MISSOURI ITEMIZED DEDUCTIONS

- · Complete this section only if you itemized deductions on your federal return. (See the instructions.)
- Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A

• •	titacii a copy oi your i ederai i oiiii 1040 (pages i and 2) and i ederai ochedule A.		
1.	Total federal itemized deductions from Federal Form 1040, Line 40	1	00
2.	2007 (FICA) — yourself — Social security \$ + Medicare \$	2	00
3.	2007 (FICA) — spouse — Social security \$ + Medicare \$	3	00
4.	2007 Railroad retirement tax — yourself (Tier I and Tier II) \$ + Medicare \$	4	00
5.	2007 Railroad retirement tax — spouse (Tier I and Tier II) \$ + Medicare \$	5	00
6.	2007 Self-employment tax — Amount from Federal Form 1040, Line 27	6	00
7.	TOTAL — Add Lines 1 through 6	7	00
8.	State and local income taxes — See instructions		
9.	Earnings taxes included in Line 8 — See instructions		
10.	Net state income taxes — Subtract Line 9 from Line 8 or enter Line 8 from the worksheet below.	10	00
11	MISSOLIBLITEMIZED DEDUCTIONS — Subtract Line 10 from Line 7. Enter here and on front of form Line 8.	11	00

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INSTRUCTIONS.

WORKSHEET — STATE AND LOCAL INCOME TAXES

Complete this worksheet only if your federal adjusted gross income from Federal Form 1040, Line 37 is more than \$156,400 (\$78,200 if married filing separate). If your federal adjusted gross income is less than or equal to these amounts, do not complete this worksheet. Attach a copy of your Federal Itemized Deduction Worksheet (Page A-10 of Federal Schedule A instructions).

1.	Amount from Federal Itemized Deduction Worksheet, Line 3 (See page A-10 of Federal Schedule A instructions.) If \$0 or less, enter "0".	1	00
2.	Amount from Federal Itemized Deduction Worksheet, Line 11 (See page A-10 of Federal Schedule A instructions.)	2	00
3.	State and local income taxes from Federal Form 1040, Schedule A, Line 5	3	00
4.	Earnings taxes included on Federal Form 1040, Schedule A, Line 5	4	00
5.	Subtract Line 4 from Line 3	5	00
6.	Divide Line 5 by Line 1	6	%
7.	Multiply Line 2 by Line 6	7	00
8.	Subtract Line 7 from Line 5. Enter here and on Itemized Deductions, Line 10, above.	8	00

2007 TAX TABLE

If Missouri taxable income from Form MO-1040B, Line 13, is less than \$9,000, use the table to figure tax; if more than \$9,000, use worksheet below or use the online tax calculator at www.dor.mo.gov/tax/personal/taxcalculator/

If Line 13 is			If Line 1	3 is													
At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is
0	100	\$ 0	1,500	1,600	\$ 26	3,000	3,100	\$ 62	4,500	4,600	\$109	6,000	6,100	\$167	7,500	7,600	\$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
							You	rself		Sı	oouse		Exan	nple	9,000		315

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Missouri taxable income (Line 13) \$ 12,000 9,000 - \$ 9,000 9,000 = \$ 3.000 Multiply by 6% x 6% 6% Х Tax on income over \$9,000 = \$ = \$ = \$ 180 Add \$315 (tax on first \$9,000) + \$ 315 315 315 TOTAL MISSOURI TAX = \$ _ = \$ 495 A separate tax must be computed for you and your spouse.

If more than \$9,000,

tax is \$315 PLUS 6% of
excess over \$9,000.

Round to nearest whole
dollar and enter on front of
form, Line 14.

This form is available upon request in alternative accessible format(s). TDD (800) 735-2966